

Nursing Role in Family Health

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Required Reading

- Berman(9th ed.): Chapter 24
- Townsend (8th ed.): Chapter 11



Objectives

- Analyzes concept of accountability by the application of the nursing process in caring for families
- Discusses components of assessment for a family
- Describes health promotion strategies for families

Family

- Def: Protects physical health of its members, provides environment conducive to physical growth and health
- Families from different cultures are an integral part of North America's rich heritage
- Family-centered Nursing

Types of Families



- Nuclear vs Extended: parents and their offsprings vs grandparents/aunts/uncles
- Traditional: both parents reside in home with their children
 - mother assuming nurturing role
 - father providing economic resources

Types of Families

- Two-Career: both parents are employed
 - greatest stressor is finding good-quality and affordable child care
- Single-Parent: stressors include child care concerns, financial, role overload and fatigue



Types of Families

- Adolescent: slight increased in 2006
 - highest among Hispanic teens, followed by Blacks, American Indian/Alaska Native
- Foster: temporary
 - legal agreement between foster family and court



Types of Families

- Blended: existing family units join together to form new families
- Intragenerational: more than two generations live together



Types of Families

- Cohabiting: unrelated individuals families live under one roof
- Gay and Lesbian: diverse as that of heterosexual families
 - significant issues and constantly changing



Types of Families

- Single Adults Living alone: 30% live by themselves



Stages of Family Development

- Single Young Adult: launching of young adult from family of origin
 - Tasks: form identity, establish intimate peer relationships, advancing toward financial independence
 - Problems:??

Stages of Family Development

- Family Joined Through Marriage/Union: commitment through new system
 - Tasks: establish new identity as couple, realign relationships with members of extended family, make decisions about having children
 - Problems:??

Stages of Family Development

- Family with Young Children: accepting new members into the system
 - Tasks: make adjustments to meet responsibilities associated with parenthood, sharing equally tasks of child rearing, integrate roles of extended family
 - Problems:??

Stages of Family Development

- The Family with Adolescents: flexibility of family boundaries to permit children's independence
 - Tasks: redefine level of dependence to provide autonomy, midlife issues related to marriage, career, and aging parents
 - Problems:??

Stages of Family Development

- The Family Launching Children and Moving on in Midlife: exiting and entering of various family members
 - Tasks: reestablish bond of dyadic marital relationship, realignment of relationships, accepting caretaking responsibilities
 - Problems:??

Stages of Family Development

- The family in Later Life: accepting the shifting of generational roles
 - Tasks: explore new social roles, accepting some decline in physiological functioning, dealing with deaths of spouse, siblings and friends
 - Problems:??

Family Variations

- Divorce: 1/3 of first marriages end in separation or divorce
 - Tasks: accepting one's own part in failure of marriage, working on problems related to custody, realigning relationships, mourning loss of marriage relationship

Family Variations

- Remarriage: ¾ of people who divorce will eventually remarry
 - Tasks: making firm commitment to confronting complexities of combining two families, open communication, facing fears
 - Problems:??

Cultural Variations

- Latino American
- Asian
- Jewish



Communication

- Functional: clear, direct, open, and honest with congruence between verbal and nonverbal
- Dysfunctional: indirect, vague, controlled, with many double-blind messages



Dysfunctional

- Communication
 - Making Assumptions
 - Belittling Feelings
 - Failing to Listen
 - Communicating Indirectly
 - Presenting Double-Bind Messages



Dysfunctional

- Self-Concept Reinforcement
 - Expressing Denigrating Remarks
 - Withholding Supportive Messages
 - Taking Over

Dysfunctional

- Family Member's Expectations
 - Ignoring Individuality
 - Demanding Proof of Love

Dysfunctional

- Handling Differences
 - Attacking
 - Avoiding
 - Surrendering

Dysfunctional

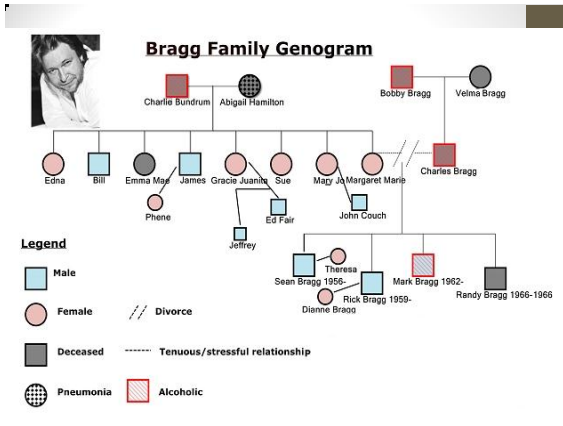
- Family Interactional Patterns
 - Patterns that perpetuate or intensify problems rather solve them
 - Patterns that cause emotional discomfort

Dysfunctional

- Family Climate
 - Tension, frustration, guilt, anger, resentment, depression, despair

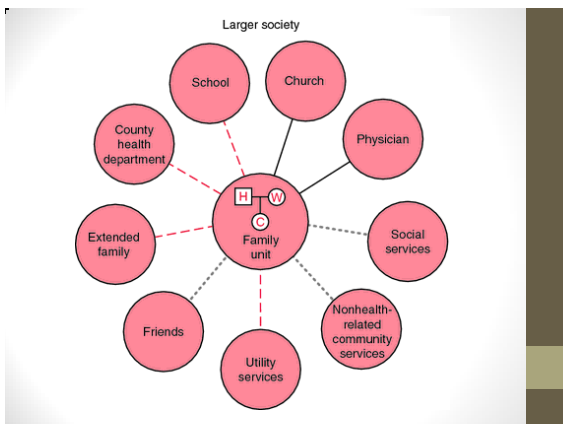
Nursing Management

- Assessment: complete health history
- Genogram: visual representations of gender and lines of birth descent



Nursing Management

- Ecomap: provides visualization of how family unit interacts with external community environment



Nursing Management

- Health Beliefs: may reflect lack of information or misinformation about health or disease
- Family Communication Patterns: effectively communication vs dysfunctional

Family Coping Mechanisms

- Def: behaviors use to deal with stress or changes
- How do families related to stress



Family Coping Mechanisms

- Internal resources: knowledge, skills, effective communication patterns assist in problem-solving process
- External support systems: promote coping and adaptation

Family Violence

- Incidence increased in recent years
- Examples: abuse between intimate partners, child abuse, elder abuse

Risk for Health Problems

- Maturity Factors: Families with members at both ends of age continuum;
 - Older adults may feel lack of purpose and decreased self esteem
- Hereditary Factors: familial history

Risk for Health Problems

- Sex or Ethnicity: hereditary
- Sociologic Factors: poverty
- Lifestyle Factors: smoking, good nutrition, etc

Nursing Diagnoses/Concerns

- Give Examples

Questions